



Amendment Under 37 C.F.R. § 1.116 Group Art Unit 2152, Expedited Procedure

Docket No. 00862.002756.

Examiner: L.H. Luu

Group Art Unit: 2152

Ond f/B

In re Application of:

KEIICHI SAKAI

Appln. No.: 09/277,821

Filed: March 29, 1999

or: SERVER, SERVER SYSTEM, CLIENT, SERVER

CONTROL METHOD AND STORAGE MEDIUM

**THEREFOR** 

March 6, 2003

RECEIVED

MAR 1 4 2003

THE COMMISSIONER FOR PATENTS

**BOX AF** 

Washington, D.C. 20231

**Technology Center 2100** 

Sir:

Transmitted herewith is an amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

		C	LAIMS AS AMEN	DED		
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 37	MINUS	**	= 0	x \$9 \$18	\$0
INDEP. CLAIMS	* 12	MINUS	*** 12	= 0	x \$42 \$84	\$0
Fee for Multiple Dependent claims \$140°/\$280						\$0
			TOTAL ADDITION TO THIS AMEN			\$0

3.	X	Fee \$320.00	
		Fee \$160.00 (Verified Statement claiming small entity status is end not filed previously.)	closed, if
		X Enclosed	
		Not required (fee paid in prior appeal)	
		Charge to Deposit Account No. 06-1205 (One additional cothis Notice enclosed herewith)	py of
require	ized to e ed durin	Any prior general authorization to charge an issue fee under 37 C.F. punt No. 06-1205 is hereby revoked. The Commissioner is hereby large any additional fees under 37 C.F.R. 1.16 or 1.17 which may the entire pendency of this application, or to credit any overpayment No. 06-1205.	he
5. telepho addres	X one at (2 s given	Applicant's undersigned attorney may be reached in our New York 2) 218-2100. All correspondence should continue to be directed telow.	office by o our
		Respectfully submitted,	
		Attorney for Applicant  Registration No. 38,586	_

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3801 Facsimile: (212) 218-2200

*	If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this
***	space.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space
	°Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.
X	A check in the amount of \$930.00 to cover the Extension fee for response with a three-month extension is enclosed.
X	A check in the amount of \$320.00 to cover the fee for the Notice of Appeal is enclosed.
<u>X</u>	Applicant's undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,

Attorney for Applicant

Registration No. 38,586

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